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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/823,774	
	Filing Date	April 14, 2004	
	First Named Inventor	David B. PHILLIPS	
	Art Unit	3766	
	Examiner Name	Deborah Leslie MALAMUD	
Total Number of Pages in This Submission	3	Attorney Docket Number	05610.0002.NPUS00

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): RESPONSE TO RESTRICTION REQUIREMENT
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	HOWREY LLP		
Signature			
Printed name	Michael J. Bell		
Date	May 22, 2006	Reg. No.	39,604

CERTIFICATE OF TRANSMISSION/MAILING	
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UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

David B. PHILLIPS

Appl. No. 10/823,774

Filed: April 14, 2004

For: **ELECTRICAL STIMULATION FOR
TREATING NEUROPATHY USING
ASYMETRIC BIPHASIC SIGNALS**

Confirmation No. 4706

Art Unit: 3766

Examiner: Malamud, Deborah Leslie

Atty. Docket: 05610.0002.NPUS00

Response to Restriction Requirement

Mail Stop **Amendment**
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Restriction Requirement dated April 26, 2006, Applicants submit the following Remarks.

It is not believed that extensions of time or fees for net addition of claims are required beyond those that may otherwise be provided for in documents accompanying this paper. However, if additional extensions of time are necessary to prevent abandonment of this application, then such extensions of time are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefor (including fees for net addition of claims) are hereby authorized to be charged to our Deposit Account No. 08-3038 referencing docket number **05610.0002.NPUS00**.

Remarks begin on page 2 of this paper.